



Bib Data Sheet

SERIAL NUMBER 0716,029	FILING DATE 11/17/2000 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 6200-0013
APPLICANTS Feng-Jing Chen, Salt Lake City, UT ; Mahesh V. Patel, Salt Lake City, UT ;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/17/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY UT	SHEETS DRAWING -	TOTAL CLAIMS 51
Verified and Acknowledged Examiner's Signature: [Signature] Initials: [Initials]		INDEPENDENT CLAIMS 9		
ADDRESS 23980				
TITLE Pharmaceutical compositions and dosage forms for administration of <i>fenofibrate</i> hydrophobic drugs				
FINING FEE RECEIVED 1891	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

BIBDATASHEET*

CONFIRMATION NO. 7055

Data Sheet

SERIAL NUMBER 09/716,029	FILING DATE 11/17/2000 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 6200-0013
-----------------------------	---------------------------------------	--------------	------------------------	-------------------------------------

APPLICANTS

Feng-Jing Chen, Salt Lake City, UT;

Mahesh V. Patel, Salt Lake City, UT;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 03/17/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY UT	SHEETS DRAWING	TOTAL CLAIMS 51	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

20551

THORPE NORTH & WESTERN, LLP.

8180 SOUTH 700 EAST, SUITE 200

P.O. BOX 1219

SANDY, UT

84070

TITLE

PHARMACEUTICAL COMPOSITIONS AND DOSAGE FORMS FOR ADMINISTRATION OF HYDROPHOBIC DRUGS

FILING FEE

RECEIVED

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of
time)